

ISSUE SLIP STATEMENT AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		21	11/29/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	SLC	809	6-19-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	4/10/01
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23	✓	✓	4/27/01
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41	✓	✓	4/27/01
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49	✓	✓	4/27/01
50	✓	✓	4/27/01

Claim	Final	Original	Date
51	✓	✓	4/11/01
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here